

Extra! Extra!

Curbing Problem Drinking	1
Webinar Opportunity	1
Putnam, Kosciusko Drug Take Back Days, Other Alcohol Info	2
Counseling and Treatment	3

Brief counseling may curb problem drinking

From Health.com-September 24, 2012

Brief counseling sessions with primary care doctors can help curb risky drinking in people who aren't full-blown alcoholics but who binge drink or otherwise consume more alcohol than is considered healthy, a new [study](#) has found.

The most effective interventions included two 15-minute visits with a doctor, followed two weeks later by five-minute phone calls with a nurse, according to the study, a comprehensive review of clinical trials stretching back 25 years.

Counseling sessions typically covered the hazards of excessive drinking and strategies for cutting back.

Unlike programs geared toward alcoholics, which tend to stress total sobriety, the so-called behavioral counseling interventions examined in the study are designed to reduce drinking without necessarily eliminating it.

Adults participating in this type of program reduced their alcohol intake by an average of 3.6 drinks per week, with the changes lasting at least six to 12 months. And compared to people

in control groups, those who received counseling were more likely to stop binge drinking and meet the consumption limits recommended by their doctors.

[Health.com: How alcohol affects your body](#)

The review, which was published Monday in the *Annals of Internal Medicine*, was conducted on behalf of the U.S. Preventive Services Task Force (USPSTF), an independent group of experts that provides guidance on preventive care to the federal government. The task force is in the process of updating its recommendations on the screening and treatment of alcohol misuse.

The body of evidence summarized in the new study has grown appreciably since 2004, when the USPSTF last weighed in on this topic, but the draft recommendations issued today are largely unchanged, says Dr. Michael LeFevre, co-vice chair of the USPSTF panel that drew up the recommendations.

"The evidence that we have certainly supports that by screening and doing counseling, we can alter some risky behavior," says LeFevre, a professor of family and community medicine at the University of Missouri. "We still recommend screening for adults."

[Health.com: Are you more drunk](#)

[than you think?](#)

The task force recommendations apply only to people over age 18 who engage in "risky" or "hazardous" drinking. They do not apply to adolescents, nor to people suffering from alcoholism (also known as alcohol dependence), who generally require more extensive treatment.

There is no firm definition for risky drinking. According to the National Institute on Alcohol Abuse and Alcoholism, men who consume more than four drinks in a single day (or 14 per week) and women who consume more than three in a day (or seven per week) run the risk of experiencing alcohol-related health problems.

In one of the successful 15-minute interventions highlighted by the authors, doctors asked patients to keep a diary of how much they drank, complete a worksheet on drinking triggers, and create a "drinking agreement," a contract of sorts in which they spelled out their goals for reducing their consumption.

[Health.com: Alcohol myths busted](#)

Short interventions (as brief as five minutes) and longer interventions (up to two hours) weren't as effective as 15-minute sessions, the study found.

Why? Fifteen minutes may be just long enough to deliver a message,

yet not so long that the patient is turned off or overloaded with information, says lead author Dr. Daniel E. Jonas, an assistant professor of medicine at the University of North Carolina at Chapel Hill.

This type of brief intervention "is effective but has to be done repeatedly," says Dr. Ihsan M. Salloum, the chief of substance and alcohol abuse at the University of Miami's Miller School of Medicine.

"People respond to personalized feedback from their doctors," adds Salloum, who was not involved in the new review. That personalized attention can be hard to come by, however. At a time when doctor's appointments are often rushed as it is, incorporating alcohol screening and counseling into a regular checkup may be "challenging," Jonas says.

The review left several questions unanswered. For instance, although the authors did conclude that counseling can lower health care costs and reduce hospital stays, it's still unclear if this approach can also decrease alcohol-related health problems, accidents, injuries, and deaths.

ICJI Substance Abuse Division
Staff

Sonya Carrico-Director
317-232-1289
scarrico@cji.in.gov

Shannon Buskirk-Program
Manager
317-234-4543
sbuskirk@cji.in.gov

Stephanie Edwards-Program
Manager
317-234-4387
sedwards1@cji.in.gov

Webinar Training from Underage Drinking Enforcement Training Center

Maximizing Today's Technology to Reduce Underage Drinking

Date: Thursday, December 20, 2012

Time: 3:00-4:15 p.m. eastern

Speakers: Officer John Schutt, Las Vegas Police Department, NV; Jared Olson, Traffic Safety Prosecutor, Boise, ID

Everywhere we look, technology is being leveraged to make our lives move faster and more efficiently. For many adults it can

be a challenge keeping up with the rapidly changing demands and capabilities of the modern electronics age.

Officer John Schutt will provide an overview of how geographic information systems (GIS) mapping helped the Las Vegas PD focus their EUDL enforcement efforts in hot-spot areas of the city, resulting in improved alcohol retailer compliance

Traffic Safety Prosecutor Jared Ol-

son will add to the discussion by sharing how social networking platforms can be used to develop local intelligence regarding underage drinking events and a serve as a foundation for preventative action. Registrants will learn how using today's technology, to include GIS mapping and social networking platforms, can be tools to strategically deploy resources.

To register, visit: www.udetc.org/audioconfregistration.asp

Guide to Funding Your Community Health Initiative

The *County Health Rankings* illustrate that where we live, learn, work, and play matters to our health and that by working together we can improve the health of our communities. Moreover, the *Rankings* illustrate that all of us – from public health leaders, researchers, health care providers, community leaders, elected officials, and business owners – play a role in improving the health of our individual communities.

A common barrier many communities face is how to get the financial support for new community health policies, programs, or systems changes that are identified during community discussions or planning efforts.

The purpose of this guide is to give your

team tools for identifying and accessing funding resources for your community health initiative.

The guide has three sections:

Readiness Assessment – A self-assessment to help you determine if you're ready to apply for funding.

Developing Partnerships – Tips for developing critical partnerships for your community health initiative.

Identifying and Accessing Funding Opportunities – Where to look for funding opportunities and tips on accessing funding.

For more information, please visit the following website:

www.countyhealthrankings.org/roadmaps/opportunities/funding-guide

Download the [Guide to Funding Your Community Health Initiative](#) (Word document).

Criminal Justice Institute

Suite 1170 East
101 W Washington St
Indianapolis, IN 46201

Phone: 317-232-1233
Fax: 317-232-1295
E-mail: scarrico@cji.in.gov
sbuskirk@cji.in.gov
sedwards1@cji.in.gov

If you would like to submit information for the newsletter, email sedwards1@cji.in.gov

Doctor Visits for Drug or Alcohol Use Increased 70% Between 2001 and 2009

From DrugFree.Org- October 23, 2012

The number of doctor visits for substance use disorders increased 70 percent among American adults between 2001 and 2009, according to a new study. The increase appears to be driven in large part by prescription drug abuse, the researchers said. The availability of effective treatment also contributed to the increase, lead researcher Dr. Joseph W. Frank of Brigham and Women's Hospital in Boston told [Reuters](#). Frank estimated that 22.5 million Americans are dependent on alcohol or drugs.

The researchers analyzed data from two national surveys of physician visits, and found the number of visits involving drug or alcohol abuse or addiction rose from 10.6 million between 2001 and 2003, to 18

million between 2007 and 2009. The number of visits involving a diagnosis of opioid abuse rose almost sixfold, from 772,000 to 4.4 million.

"This finding is consistent with trends in substance use disorder-related utilization at the nation's community health centers and emergency departments and, sadly, use of its morgues," the researchers wrote in the [Archives of Internal Medicine](#).

The study found the number of people prescribed medications to treat substance use disorders during doctors' visits rose from 643,000 to 3.9 million during the study period. Buprenorphine and methadone were the most commonly prescribed medications. Talk therapy was used in about 25 million patients during the same period.

Kosciusko County Drug Take Back Day

Kosciusko County collected a total of 132 pounds of drugs on the National Drug Take Back Day. These were collected at the four drug drop boxes. Below is a picture from that day.



Putnam County Drug Take Back Day

I wanted to pass on to everyone a big THANK YOU for your support and assistance in advertising the Drug Take Back Day V held on Saturday Sept. 29, 2012 from 10:00 a.m. to 2:00 p.m. Below are the numbers from this fall's event which collected the most poundage so far in our Community.

In the four hour block 47 vehicles drove through the lot totaling 15 boxes of medication collected.

ResCare also contributed expired and unused medications on Monday Oct. 1.

Members of the Community had also dropped off medications at the Greencastle Police Department over the past several months.

In all I delivered 17 boxes of medication collected for the event totaling 422 lbs. to the Indiana State Police Post # 52 on Tuesday morning. All 17 boxes were turned over to the DEA (Drug Enforcement Administration) which sponsors the nation wide event.

Indiana's total numbers saw 52 Law Enforcement Agencies collecting medications at 81 different sites for a total of 14,196 lbs. or 7.1 tons.

Once again thank you for your support and I look forward to working with you all in April which is the next planned event.

Chief Tom Sutherlin
Greencastle Police Department

New Study States Beer as the Easiest Substance for Youth To Get

According to the 2012 National Survey of American Attitudes on Substance Abuse youth state that beer is the easiest substance to obtain for consumption. Of 1,003 youth who were asked what substances were the easiest for someone their age to get, 24% cited beer. These findings from data are from a random sampling of households in the 48 continental states who had a person ages 12 to 17 living in the household. The survey was conducted by The National Center on Addiction and Substance Abuse at Columbia University (CASA), National Survey of American Attitudes on Substance Abuse XVII: Teens, 2012. The full survey can be found at <http://www.casacolumbia.org/upload/2012/20120822teensurvey.pdf>

Male Veterans More Likely to Seek Treatment

From the Partnership at Drug-Free.Org- October 29, 2012

Male veterans with a history of heavy alcohol use are more likely than civilians to seek treatment. They are also more likely to report better overall health, and to be less depressed, according to a [study](#) presented at the American Public Health Association Annual Meeting. The study found 29 percent of veter-

ans under the age of 50 with a long history of heavy alcohol use sought treatment, compared with 17 percent of civilians. Among younger men who drank heavily into their 30s, the study found 15 percent of veterans reported being depressed, compared with 35 percent of civilians, [Newswise](#) reports.

"The findings suggest not only that Veterans Affairs treatment is avail-

able to help young veterans who have a history of heavy drinking, but that it is an effective service outreach to young veterans that can improve their health and overall quality of life," said researcher Katherine Karriker-Jaffe, PhD. "Those younger veterans without alcohol or drug problems may benefit from additional outreach from targeted services to

improve their mental and physical health."

The study defined heavy drinking as having five or more drinks at a time, at least once a week. The researchers note that studies show increased substance use disorders among veterans of Afghanistan and Iraq, compared with non-deployed service members.

Two Kids, Just Like Ours

Two fifteen-year olds, let's call them Rick and Jim, decide they are curious about alcohol, having never tried it. They convince an older friend to buy them a case of beer and one night, while parents are out of town, they settle down for a night of drinking and gaming. Good friends, they decide that they will drink each beer in tandem, so that neither "gets ahead." By the end of the night, they have consumed the case, and are perfectly matched for their alcohol drinking history: 12 beers each. Five years later, Rick is well on his way to becoming an alcoholic, drinking daily and bingeing every weekend. Jim, still under-age, has relatively little interest in alcohol, and spends his weekends fishing and studying.

Many of us have met kids like Rick and Jim, and watched them veer down different roads as they grow up. So why do some of us develop into problem drinkers, while others do not? This question has long interested lay people and scientists alike, and answers are beginning to emerge from a wide range of fields including behavioral genetics, neuroscience, and psychology. One way that people have asked the question is about whether genes or environment affected the way Rick and Jim responded to alcohol the first time they drank it. For example, did Rick enjoy alcohol more? Did he get more or less drunk than Jim, or have less of a hangover? The evidence on this issue is clear: there are genetic differences among us in how we feel when we drink alcohol. The largest single difference (that is, a difference in just one important gene) was discovered right here in Indiana by researchers at the Alcohol Research Center. They found that some of us have livers that make us feel ill when we drink because we have difficulty metabolizing the poisons created by breaking down alcohol. The minority who

have these livers (and they are mostly found among those of East Asian or Ashkenazi Jewish descent) have relatively little chance of becoming an alcoholic.

What about the rest of us, who have livers that do not make us feel ill when we drink? Increasingly, we are finding that differences among us may actually predate our troubles with alcohol, and perhaps even our first drink. In other words, these genetic and environmental differences aren't specific to alcohol, but affect many behaviors and interact with the tendency to drink in some way. One important study, again emerging out of a research group with strong ties to the Indiana Alcohol Research Center, explored a gene called GABRA2 that affects our brains, and interacts with a neurotransmitter called GABA. They found that there are two types of this gene; one type, which was previously shown to increase the risk for alcoholism in adults, also increased the risk for conduct disorder in adolescence, before heavy drinking sets in. Conduct disorder is a serious condition in which kids have repeated difficulties interacting with authority figures, and often get into arguments and fights with them as well as with their peers. They are also more likely to have problems with alcohol and drugs. Although previously scientists had focused on how GABRA2 might affect what alcohol itself does to the brain, this study showed that GABRA2 affects behavior even before drinking problems set in, and perhaps "sets the stage" for drinking problems to emerge. Kids who have trouble with authority figures intuitively would seem more likely to seek out alcohol, perhaps partly because they know that drinking "breaks the rules," and they may also seek out drinking because they know they're more likely to get into trouble when they're drunk.

These examples are interesting partly because although they are both genetic, heritable differences among us that alter the likelihood of becoming an alcoholic, two things stand out about them. First of all, they are not, by any means, deterministic. Inheriting a liver that makes you feel ill when you drink will reduce your chance of becoming an alcoholic by about two thirds – considerable, but there are still those with the altered liver metabolism who become alcoholics. Furthermore, the vast majority of us lack these altered livers, so they don't play a role in our drinking. GABRA2's effect is even more equivocal: when you inherit the "high drinking" variant of the gene, it might increase your risk of developing alcoholism by just 2 or 3 percent. Second, even genetic differences are subject to environmental modulation. Just because a behavior is inherited doesn't mean that behavior is written at birth. One study, conducted by Danielle Dick and colleagues, sought out whether parents would make any difference in the trajectory of kids who were at risk for alcoholism and conduct disorder, because they'd inherited the high risk type of GABRA2 gene. When interviewing the parents, she found that those who were very involved with their kids – for example, they knew the names of their kids'

best friends, and tended to know where they were – almost completely eliminated the influence of the GABRA2 gene on antisocial behavior in their kids. Parents who had little control over their kids' lives showed an effect of this gene that was even larger than normal. This is what behavioral geneticists call a "gene X environment interaction." Growing up in an environment with high parental involvement reduces the likelihood that a genetic tendency will yield long-term conduct problems.

When we seek to understand whether genes or environment are more important, our answer can't be that it is one or the other. Instead, we now understand that in alcoholism (as with many behaviors), genes, environment, and the interaction between the two all play important roles. The emerging field of genetics will not change any of these answers fundamentally, but will instead allow us to get a better handle on the exact ways in which genes and environment play their roles and, if we are lucky, how we might best intervene to reduce the risk that our teens will develop into alcoholics.

Reminders

CCP/Updates due December 1, 2012

Boone, Clinton, Fayette, Jay

Next Commission Meeting:
TO BE DETERMINED



**The Governor's Commission
for a Drug-Free Indiana**